

**U.S. Postal Service**  
**CERTIFIED MAIL RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*

WILMINGTON DE 19801																
7001 0320 0004 3020 1472	 SAN DIEGO, CA SORRENTO VALLEY FEB 6 2008 02/06/2008 USPS															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Postage</td> <td style="width: 15%; text-align: right;">\$ 1.65</td> <td style="width: 15%; text-align: right;">0121</td> </tr> <tr> <td>Certified Fee</td> <td style="text-align: right;">\$2.65</td> <td></td> </tr> <tr> <td>Return Receipt Fee (Endorsement Required)</td> <td style="text-align: right;">\$2.15</td> <td></td> </tr> <tr> <td>Restricted Delivery Fee (Endorsement Required)</td> <td style="text-align: right;">\$0.00</td> <td></td> </tr> <tr> <td>Total Postage &amp; Fees</td> <td style="text-align: right;">\$ 6.45</td> <td></td> </tr> </table>		Postage	\$ 1.65	0121	Certified Fee	\$2.65		Return Receipt Fee (Endorsement Required)	\$2.15		Restricted Delivery Fee (Endorsement Required)	\$0.00		Total Postage & Fees	\$ 6.45	
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Sent To <b>Motorola, Inc.</b> <b>The Corporation Trust Company</b> Street, Apt. No.: or PO Box No.: <b>1209 Orange Street</b> City, State, ZIP: 4 <b>Wilmington, DE 19801</b>																
<small>PS Form 3800, January 2001</small> <small>See Reverse for Instructions</small>																

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address
  2.  Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

Motorola, Inc.  
 The Corporation Trust Company  
 Corporation Trust Center  
 1209 Orange Street  
 Wilmington, DE 19801

4a. Article Number

7001 0320 0004 3020 1472

4b. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Registered                     | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                   | <input type="checkbox"/> Insured              |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

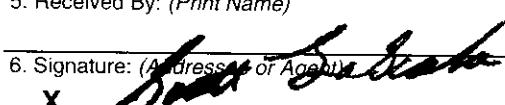
FEB 11 2008

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Address or Agent)

X

  
 PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.